

The Hampden Hippocrat

A Bulletin for the Hampden District of the Massachusetts Medical Society

VOLUME IV

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NUMBER 4

They're Marching Home

The Hippocrat presumes warm welcome to proclaim in behalf of all of Hampden County to the returning warriors who were distinguished by wearing the caduceus. We are proud of them, man or woman, commissioned or not—proud of their spirit, their numbers and their achievements that kept lethal statistics at un-dreamed-of low levels. Thanks to you, the Four Horsemen no longer can ride unopposed. Together, come Hell or high water, we must hamstring those steeds against future raids.

"What saw you to tell us," O Wound-Dressers, "of those armies so rapid so wondrous?" Are you a part of all that you have met; and is all experience, indeed, "an arch where thro' gleams that untravelled world whose margin fades forever and forever when you move?" Or was it anopheles that got you?

May the long months of separation be erased by the joys of reunion with your families and your confreres, and above

all with those clients who have been waiting so long. That separation pay may be puny, but still it's gravy.

We hope that Hampden County will look good to you and not too crowded, though when you get jammed in the five o'clock traffic and find your offices pre-empted, and hospital wards overflowing, doubts may rise. Perhaps in truth you will find more to hold your attention here than you did at Eniwetok or Oran or Reykjavik.

Your refresher courses will be in full swing by the first of the year—at least for you younger M.D.s who desire hospital residencies. Others must wait until enough instructors have been released to relieve over-burdened war-time staffs. (And don't forget that the Post War Loan Fund is ready in case of need.)

Hail and thrice welcome, say we; and in the name of Hippocrates take over soon!

To Spoon Feed or Not

That is the question at the present writing, but it pertains to education and is devoid of sentiment. The query was put by a member of the crew of the Post-war Planning Committee's trial balloonists who, at October's end, parachuted

into the medical precincts of Western Massachusetts with a brimming porringer of pituitary pap. The greatest obstacle that a teacher must face, he felt, is the accurate gauging of receptivity of the

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Hampden Hippocrat

"Life is short and art is long, the occasion fleeting, experience fallacious and judgment difficult."
—Hippocrates, 430 B.C.

OFFICERS OF THE HAMPDEN DISTRICT MEDICAL SOCIETY

President—Merrill C. Hosmer
Vice-President—Patrick E. Gear
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Aftermath

In point of attendance the October sessions for Post Graduate Instruction in our three Western counties indubitably are to be adjudged successful. Genuine interest was manifested in Springfield, Holyoke, Northampton and Greenfield in spite of some morning and afternoon hours that interfered with work. Quite a number of noses were counted in the various audiences that for years have escaped enumeration. Such excellent planning on the part of the State Committeemen will in the future imperil these and other records of nose owners for isolationism with or without splendor. No longer can anyone afford to remain in crepuscule or a state more Stygian.

As to the program, there was, of course, considerable discussion—as there always will be, thank God, whenever G.I.s or M.D.s foregather. However, the steady attention given the speakers, and the length of the discussions when time per-

mitted, indicated approval by the majority. Some men considered the key of the instruction to be pitched above the range of the average listener. Others missed the detailed therapeutics that twenty minute limits and abbreviated question periods prohibited. But the majority were glad to refresh their conceptions of the relationship of the glands of internal secretion with the underlying physiochemistry that is involved.

There is a unanimous call for more sessions, some suggesting even monthly intervals. Most men would prefer to have the number of speakers limited to three at most, so as to permit more time to consider each subject. A majority likewise would prefer evening sessions, but will be glad to adjust their routines if they are not feasible. The Greenfield session at 8:00 P.M. is cited as particularly happy both as to excellent attendance and active discussion.

Votes of thanks were anything but perfunctory all along the line. Speakers Aub, Williams, Bartels, Rock, Root and Ohler may well be pleased with the initial effort in post-war education in medicine, even though made at the cost of no little strength from reserves that already are overdrawn. "Happy Warrior" Chapin, M.E. of the Springfield area, with the help of an accomplished wife, a new house, potatoes and assorted comestibles, personally undertook to offer concrete thanks in behalf of himself and all of us along the Pioneer Valley circuit—(and we don't mean Mrs. C's biscuits!). The prevailing reaction may be summed up in one word, Encore!

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Post War Loan Fund

By vote of the Council at the meeting on October 3, 1945, the Postwar Loan Fund was made operative. Its one purpose is to afford immediate financial assistance, where needed, to Medical Officers who on entry into any of the services, were members in good standing of the Massachusetts Medical Society and who on separation, received an honorable discharge, or a certificate of satisfactory service.

Complete information is available with reference to the Fund from George L. Schadt, M.D., Chairman, Postwar Loan Fund, 8 Fenway, Boston, 15, Massachusetts.

The Gallupe Plan

Now that the unapproved medical schools have ceased to function in Massachusetts, and the flow of their graduates into practice in this state has been stopped, there remains the problem of what to do about the men now practicing in our Commonwealth who have had an inferior medical education, and whose patients may be getting sub-standard care in hospitals not approved by the A.M.A. or the College of Surgeons.

A goodly number of these doctors are potentially good men, and they have a real desire to improve themselves and thereby improve the care given their patients. Some of them are of poor quality and practice medicine unethically and with the sole purpose of increasing their incomes.

As a result of this state of affairs many inferior hospitals have sprung up for the use of these doctors and their patients. Unquestionably these hospitals do not af-

ford the best in medical, surgical, and obstetrical care for a very large number of patients.

It would seem that this is a problem to be solved by the community hospitals and their staffs for the benefit of the people in the communities who need hospitalization. If it can be solved, the good hospitals will be benefitted, the doctors in the communities will be better trained, the patients will receive far better care, and the community funds will be increased. At the same time, the inferior hospitals will decrease in number, and less criticism will be aimed at the medical profession by the legislators and the doctors not now admitted to our ranks.

The plan to be followed in Waltham by the staff of that hospital follows: Invite all the doctors having an M.D. and registered to practice, but who are graduates of sub-standard schools, to meet with the Chairman of the Executive Committee of the staff and the Director of the Hospital and explain the plan to them. This plan consists of inviting these men to use the x-ray and laboratory facilities of the hospital, to attend all staff meetings and all clinico-pathological conferences; urging them to send their patients needing hospitalization into the hospital under the care of members of the staff. They might be invited to visit the patients in the hospital in order that they could keep in touch with the progress of the patient and become better acquainted with the consulting staff member and the hospital routine. After an indefinite period, perhaps not more than a few months, it would be possible to select from the group, the doctors who are intelligent, ethical, and really interested in bettering themselves and their patients. These men could then be allowed to take care of their own patients in the hospital under

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guidance by staff members chosen for their ability and their desire to teach and be helpful. The doctors so chosen to be allowed to use the hospital would do no surgery and no operative obstetrics. These doctors could be given membership, on a temporary basis, on the courtesy staff.

TO SPOON FEED OR NOT

(Continued from Page 1)

listeners and how best to bridge the gap that sometimes yawns abysmally between himself and them. Perhaps a retrospection of man's rough educational road may uncover neglected lights to illumine the approach to an answer.

Mark Hopkins and his log often are cantilevered into such discussions as the classical example of an inspirational pedagogue, but there is no reference made to his use of spoons, or even hickory rulers. His log must have presented embarrassing limitations, if not discomforts, that somehow enhanced rather than diminished the transmission of ideas. Propinquity is advantageous in medical meetings as well. Opportunity thus is offered to examine current leaders face to face, and to percuss them with the fingers of understanding. Most of those who remember him at all in 1945, think of Mark Hopkins as a college president because he presided over the destiny of Williams for a matter of thirty-six years. But disciples of Hippocrates must not forget that long before that, namely in 1828, he acquired an M.D. and hung out his shingle for the practice of medicine in New York.

Two hundred and twenty-seven pages later in the encyclopedia, but more than fourteen hundred years before him in time, another outstanding teacher who did not stoop to spoons, reposes in almost complete oblivion except for proofreaders

and bookworms. Hypatia, the lovely Eclectic Preceptress, is said to have enlightened "a numerous auditory" at her Alexandrine salons in the tenets of the Neo-Platonic school by the sheer force of her personality. (Or was it that her chitons were sheer?) But alas, such is the risk of pushing instruction too far, a fifth century mob struck her down, just as rioters are committing murder today in Egypt, again at the instigation of fanatics.

Medical personalities, by way of interjection, may be impressive and their topics full of interest, yet even spoon feeding, nay gavage itself, may still prove ineffectual if training in such particulars as diction and elocution has been neglected. The frustration of the most avid spoonees mounts when dialects bedevil them, or, as frequently happens, a foreign language hangover completes their befuddlement. The comparatively low level of excellence in medical articulators as a group is a topic that might be elaborated at another time.

Neglect for the nonce the ant, (and the comic strip), thou sluggards, and go to the maligned crow for hints on education, at the suggestion of Henry Ward Beecher. If men wore feathers and wings" said he, "very few of them would be clever enough to be crows." Quick to profit by experience, the crow is a leading exponent of the trial and error method of learning. Not only did he learn from the gulls the technique of cracking clams by dropping them from aloft, but he soon learned to measure with uncanny accuracy the range of a shotgun when the more myopic of his fellows failed to survive. These wise birds teach us that spoon feeding may be needed for fledglings, in fact, is sedulously employed all

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through that early stage, but that it is absolutely vital to teach the young individuals to think if they are to live and, in the end, to attain to judgment.

The Sub-committee on Education may be familiar with the findings of Harvard's group of "quiet influencers" who have spent the past two years and much thought in consideration of ways and means of rejuvenating higher education in the United States. All of you are hereby referred to the epochal report entitled "General Education in a Free Society" for details pertinent to the present consideration. An impartial review by Professor Jacques Barzun of Columbia University appeared in the Atlantic Monthly of October 1945. The day of the gentleman and scholar, it seems, is gone (along with the broad "a"?) supplanted by the era of the scholar and the citizen. Harvard bids the nation to cultivate and form the mind rather than to merely train and fill it. "A man may be master of a trade, an art, or a profession, but he is before all else a citizen." As such he is called upon to form judgments and take action about things other than those in his own line, than which—by definition—nothing is narrower." It might be a good time for us hard-shell practitioners of medicine to abandon our ruts and to sit in on a symposium imbued with the promise of the New Era.

Dr. Ohler's committee has made a good beginning. Future sessions should prove to be even more stimulating, though spoons, perhaps, cannot entirely be discarded.

The words that Bobby Burns long since spoke in humility might well be applied to man-made programs, and especially to long-winded essayists,

"God knows, I'm no' the thing I should be,

Nor am I even the thing I could be."

But who can say we dinna' try?

S. Q. LAPIUS

Notice

The next Post Graduate lectures from Boston will probably be on infectious diseases and will be either the last Monday in January or the first Monday in February. The meeting will open at the Springfield Hospital in the morning, Northampton or Greenfield in the afternoon, and close in one of the Holyoke hospitals in the evening totaling one day only. Please watch the newspapers. There will be no further official notice. All doctors are welcome.

Mass. Rehabilitation

To the Editor of the *Hippocrat*:

As alternate I attended the special meeting of the Executive Committee of the Council.

The meeting was called "for the purpose of passing upon the schedule of fees whose purpose it is to cover medical services rendered under the Massachusetts Rehabilitation Program."

Knowing nothing of the existence of any such program inquiries were made of Dr. Halligan and various district society officials; but no one knew or had heard of any such program, and this also included members of our Society and committees, and many lay citizens usually well-informed on social economic problems.

Later I contacted Dr. Joseph Shortwell, Chairman of the Committee on Rehabilitation, and learned that the program was not for rejected draftees and members of the returning armed forces but was for all persons over 16 years of age, if they had or were suspected of having some more or less static remediable condition and their financial status correct. Such persons, if approved, were allotted up to 90 days hospitalization and medical and surgical fees.

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The Program is not for the indigent class, already cared for, nor for veterans who are already wholly cared for by Federal government, but is for those over 16 in more or less moderate circumstances, owning home, car, insurance, etc., etc. These cases would be passed on by the medical chief recently appointed.

This expensive and expanding work is borne equally by the Federal and State governments, and appropriations therefor have already been made.

All with whom I talked considered the program a definite entering wedge of state medicine, or state medicine itself, and with the knowledge of various members of our district, I went to the meeting and voted against the fee table and against the Executive Committee taking final action in the matter without referring the subject to the Council meeting to be held next week, October 3.

At this meeting of the Executive Committee, "the schedule after considerable debate and some amendments was finally approved," by vote of the Committee in the name of the Massachusetts Medical Society, and your representative was the only recorded opposition.

The Committee on Rehabilitation was appointed by the Council in 1941 and, according to President Ober in his annual address in 1942, its object was to "see that those draftees having remediable defects may be rehabilitated so that they will be fit for war service. The Committee is functioning in conjunction with the Selective Service authorities." Now, and so far as I know, with no further authority from the Medical Society, the program has rather extensive plans for rehabilitating all persons above 16 years of age in Massachusetts. It seemed to your alternate that approval of a fee schedule of 212

operations presupposed approval of the Program; but it was ruled that the fee table was before the Committee and there was no discussion as to the Massachusetts Rehabilitation Program itself. This program is unknown to most of the members of the Massachusetts Medical Society, although it may easily affect half of their patients. It may be a great boon to insurance companies. In no place in a 27-page Federal pamphlet on "Manual of Policies" was the attending physician mentioned at all. This pamphlet stated that "The first objective of the State Agency in performing any of the functions is to develop and establish a professional relationship with the individual client," and said client is already the patient of some member of the medical profession. All this work is to be carried on, not in a medical professional atmosphere, but under the State Board of Education.

I have been considerably diligent in trying to obtain definite tangible literature on the subject. The general impression has been that it was for returning veterans. The appropriations in the Legislature and in Congress, intentionally or otherwise, surely attracted no attention; and now the Massachusetts Rehabilitation Program is gaining momentum with the official approval of the Massachusetts Medical Society.

RICHARD DUTTON, M.D.

Wakefield, Mass.

Roll Call of Doctors Attending Post

Graduate Medical Instruction

Mercy Hospital, Oct. 29, 1945

Ludlow, Mass.

S. J. Posner.

26 Bottsford St.,

Moncton, N. B., Canada

C. R. Baxter.

Chicopee Falls, Mass.

Edward M. Sullivan.

W. Springfield, Mass.

James J. Visconti.

U. S. Army

Frank E. Hurley.

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Palmer, Mass.

Henry A. Dumphy.

Chicopee, Mass.

Eugene W. Beauchamp.

Thompsonville, Conn.

Bernard S. Dignam.

Springfield, Mass.

Wm. R. Chapin, James H. Quinn, Fred Hopkins, E. H. Judd, J. E. Dwyer, W. J. Dillon, H. Bernard Tillman, Lincoln Eramo, Eugene Walker, Joseph Rini, E. M. Sullivan, Fred. M. H. Ziter.

H. P. Kennedy, M. J. Cariani, James Z. Naurison, William J. Kisiel, Arthur H. Steinhardt, J. L. Chereskin, Michael Cogan, Charles J. Spaid, James Bruce, Harry Roberts, Edward White.

Joseph H. Lussier, Richard A. Rochford, George B. Corcoran, Arthur H. Riordan, Theodore Schwartz, Charles J. Downey, John V. Greany, Helene Glickman.

Robert LaMarche, Edward P. Connolly, Benjamin L. Gipestein, Milton S. Monyek, Gustav Frank, Richard Bachmann, Frank Sirulnik, Lawrence D. Chapin, Joseph M. Baker, Michael Lazarchick, P. M. Moriarty, E. G. White, Ambrose J. Connelly, John M. Maloney.

Springfield Academy of Medicine**Oct. 30, 1945**

Wm. A. R. Chapin, J. Fletcher Woneon, H. J. Corwin, R. S. Boyer, C. R. Baxter, Josefa Zaratt, J. Bernstein, Allen G. Rice, Sprague Curtis, E. M. Sullivan, Richard W. Thaler, Frederic Hagler, F. R. Dutton.

Grace E. Wilder, J. Leff, Ednah Hatt, S. Linoff, Michael Cogan, Edward G. White, Leo Schwartz, Frank Sirulnik, Arthur Goodwin, Charles C. Derrick, Frank E. Hurley, T. H. McSweeney.

Fred Hopkins, H. B. Tillman, Theodore Schwartz, Charles J. Spaid, R. P. Rodney, F. Wisner, H. Jacobs, Arthur Edgelow, Charles ———, Samuel Blaker, H. E. Cherry, E. H. Judd, B. L. Gipestein, M. J. Cariani, R. Rabinowitz.

Undoubtedly other doctors attended

these two Springfield meetings, but their names are not on the record.

WAR VETERANS RETURNED TO HOLYOKE**Capt. Harry A. Baker, U. S. Army**

Active duty, August 27, 1942 to March 8, 1944. Stationed at Ft. Bagg. Foreign duty September 15, 1942 to June 1943, England and on invasion at Algiers. Returned from overseas June 1943 and then stationed at Tilton General Hospital.

Commander James E. Byrnes, U. S. Navy

Active duty, October 19, 1942 to November 1, 1945. Stationed at Charleston Navy Yard, Camp Perry, Endicott, Parks and Hunene. Foreign duty with the Sea Bees, March 15, 1944 to September 22, 1945, in Hawaii, Midway and Philippines. Duties, Chief of Surgery.

Lt. Col. Leo A. Byrnes, U. S. Army

Active duty June 6, 1942 to July 23, 1945. Stationed at Westover Field, Warner Robins, Ga., and Kelly Field, Texas. Duties, Commanding Officer of Hospital at Kelly Field.

Lt. Comdr. John J. Driscoll, U. S. Navy

(Recently has been separated from active service but is out of town and not available for details.)

Lt. Comdr. Noah Feldman, U. S. Navy

Active duty from March 24, 1941 to November 10, 1945. Stationed at Quantico, Va., and New River, N. C. with Marines. Transferred to New Zealand May 20, 1942. Invasion of Guadalcanal August 7, 1942. First doctor ashore. Awarded the Presidential citation on Oct. 9, 1942. Returned to Australia. Home duty August 1943 at the Farragut Naval Hospital. Foreign, December 1, 1944, assigned to an L.S.T. Pacific invasion, Borneo, Mindanao and Luzon. In front at New Guinea, Okinawa, Balikpapan and

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Japan. Returned to U. S. A. on October 27, 1945.

Capt. Edgar J. Fleury, U. S. Army

Active duty September 12, 1942 to October 17, 1944. Stationed at Fort Jackson, S. C., Camp Forest, Tenn., Fort Baggs, N. J., Camp Attlebury, Indiana, and the Walter Reed General Hospital. Duties, Medical Service.

Comdr. Samuel Fox, U. S. Navy

Active duty September 28, 1942 to November 3, 1945. Stationed at Charleston Navy Yard. Foreign duty from December 12, 1942 to June 16, 1944 with an aviation unit at French Morocco. Home duty from August 1, 1944 to November 3, 1945 at Newport, R. I. Duties, Chief of Medicine.

Lt. Andrew Mazzolini, U. S. Army

Active duty, October 30, 1940 to July 8, 1943. Stationed at Fort Benning, Ga., and Lawson General Hospital, Atlanta, Ga. Duties, Medical Officer.

Lt. Comdr. Edward J. McHugh, U. S. Navy

Active duty, November 23, 1942 to No-

vember 1, 1945. Assigned to **U.S.S. Florence Nightingale**—Attack troop transport. Convoy duty in Atlantic for 10 months. Invasion of Sicily. Home duty Naval Air Station, N. Y. Assigned to **U.S.S. Propus**—11 months convoy duty in the Pacific. Home duty Chelsea Naval Hospital. Duties of a surgeon.

Capt. Bernard J. Niemi, U. S. Army

Active duty September 4, 1942 to July 15, 1945. Stationed at Camp Hale, Colorado, Camp Carson, Colorado and Fort Leonard, Montana. Duties, Proctologist.

Major William W. Teahan, U. S. Army

Active duty, August 17, 1942 to October 15, 1945. Assigned to Rhode Island General Hospital unit. Foreign duty from January 20, 1943 to May 18, 1945 in Burma, China and India. Awarded the Bronze Star medal for meritorious service. Duties, surgeon.

Captain Austin Whitcomb, U. S. Army

Active duty December 2, 1942 to October 14, 1945. Stationed at Fort Jackson, S. C. Harvard Medical School, course in Surgery of extremities for 6 weeks. Duties, Surgeon.